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Atty. Docket No. YOR920030199US1  
(590.110)

NOV 6 - 2006

RESPONSE UNDER 37 CFR 1.116  
-- EXPEDITED PROCEDURE --  
EXAMINING GROUP 2129

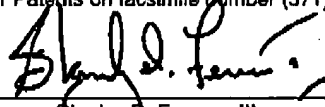
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Laxmi Parada et al.  
Examiner : 10/676,448 Tran, Mai T  
Art Unit : September 30, 2003 2129  
For : OBJECT CLASSIFICATION

November 6, 2006

AMENDMENT AFTER FINAL

I hereby certify that this correspondence and any documents referred to as enclosed therewith are being transmitted by facsimile to the Commissioner for Patents on facsimile number (571) 273-8300 on November 6, 2006.

  
Stanley D. Ference III  
Reg. No. 33,879

November 6, 2006  
Date of Signature

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Responsive to the Office Action dated September 6, 2006, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.

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**NOV 6 - 2006**

## **FERENCE & ASSOCIATES**

409 Broad Street  
Pittsburgh, Pennsylvania 15143  
Phone: (412) 741-8400  
Fax: (412) 741-9292  
Web: [www.ferencelaw.com](http://www.ferencelaw.com)

### **USPTO FACSIMILE COVER SHEET**

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To: Commissioner of Patents  
Fax Number: (571) 273-8300  
Date: November 6, 2006  
Pages: 14 pages (including this cover sheet)

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#### **MESSAGE:**

**RESPONSE UNDER 37 CFR 1.116**  
**-- EXPEDITED PROCEDURE --**  
**EXAMINING GROUP 2129**

**OBJECT CLASSIFICATION**  
Application No. 10/676,448  
Examiner Mai T Tran  
Art Unit 2129

Amendment Transmittal  
Amendment After Final

YOR920030199US1  
(590.110)

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Amendment Transmittal

NOV 6 - 2006

Atty. Docket No. YOR920030199US1  
(590.110)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Parada et al.  
Serial No. : 10/676,448 Examiner : Tran, Mai T  
Filed : September 30, 2003 Group Art Unit : 2129  
For : OBJECT CLASSIFICATION

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

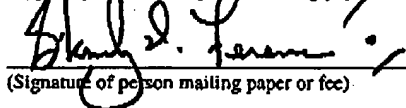
1. ☐ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 6.1.8(a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (571) 273-8300 on November 6, 2006 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III

(Type or print name of person mailing paper or fee)



(Signature of person mailing paper or fee)

Page 1 of 2

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**Amendment Transmittal**

Atty. Docket No. YOR920030199US1  
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5. ☐ Also enclosed: \_\_\_\_\_
6. ☐ No additional filing fee is required.
7. ☒ The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
				RATE	FEE		RATE	FEE
Total	9	** 9	= * 0	x \$25	=	O	x \$50	= 0
Claims						R		
Ind.	3	*** 3	= * 0	x \$100	=	O	x \$200	= 0
Claims						R		
<input type="checkbox"/> Multiple Dependent Claim Presented				+ \$180	=	O	+ \$360	=
						R		
				<b>TOTAL</b>	= \$ _____	O	<b>TOTAL</b>	= \$0 _____
						R		

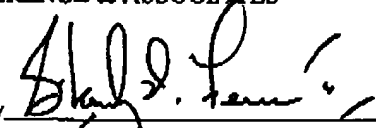
- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.
- \*\*\* If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$\_\_\_\_\_ to cover the filing fee.
9. ☐ The Commissioner is hereby authorized to charge the \$\_\_\_\_\_ filing fee to Deposit Account No. 50-0510.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES

By

  
Stanley D. Ference III  
Reg. No. 33,879

Dated: November 6, 2006

Mailing Address:

Customer No. 35195  
FERENCE & ASSOCIATES  
409 Broad Street  
Pittsburgh, Pennsylvania 15143  
(412) 741-8400  
(412) 741-9292 - Facsimile

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